State: North Carolina

Date: October 14/15, 2004

Facilitator: Gwo-Wei Torng

State Participants: Charles Glover (NCDOT) Kathy McGehee (NCDHHS)

Phyllis Stewart (NCDHHS, Division of Aging)

## Background:

- The State of North Carolina has over 25 years of experience in coordinating human service transportation across DOT and DHHS agencies. In December 1978, a Governor's Executive Order was issued, which established the foundation for human service transportation coordination.
- The governor designated Human Service Transportation Council makes recommendations for human service transportation policies and promotes coordination across State agencies.
- The State transportation planning policy requires designation of single public transportation service provider per service area. As a result, there are currently 85 Community Transportation Systems serving 100 counties. All are single county systems with the exception of 7 multi-county systems.
- In the last couple of years, the State has expanded its commitment to public transportation coordination by developing strategies to better accommodate the demand for cross-county trips for various purposes, including non-emergency medical, employment, etc.
- Although most county human service agencies use the Community Transportation
  Systems to meet client transportation needs, services are sometimes purchased from
  private transportation providers, largely due to cost consideration. Private
  transportation providers are often able to provide services at a lower cost because
  they are not subject to stringent FTA regulations (e.g., mandatory drug and alcohol
  testing, criminal background checks, safety, etc.), which increase the trip cost.

### **Actions:**

The NC team decided to have an extensive discussion on the issue of Regionalization. A recent study carried out by the Institute for Transportation Research and Education (ITRE) of North Carolina State University suggested potential cost efficiency and service enhancement through regionalizing public transportation systems. The NC Team discussed the following action items related to the regionalization initiative.

- Identify possible incentives for local communities (counties) and public transit providers to form regional coalitions voluntarily, including:
  - Additional operating assistance from the State
  - Reduced/waived local match requirement on capital projects
  - Additional administration assistance from the State
  - Additional technology assistance (e.g., ITS deployment) from the State
- Develop outreach plans with fact sheets documenting the benefits of consolidating local systems and hold a series of local meetings and public campaigns to increase awareness of the issue. Key stakeholders and decision makers at the local level

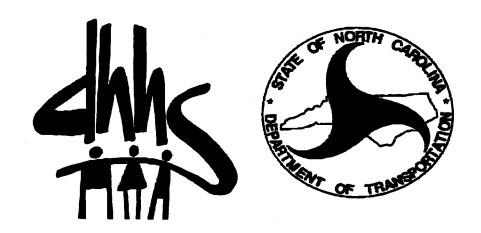
would include the County Directors of Social Services, the County Manager and the County Commissioners. In order to make the regionalization initiative a success, their buy-in is essential. The focus is to promote the benefits of regionalization in terms of quality of service improvement, cost efficiency and expanded services to the local communities. Job cuts are not anticipated; however, staff responsibilities may change as a result of the transition to a regional transportation provider.

- Conduct a feasibility analysis of regionalization from a pilot demonstration in one region of the state. The first task is to identify local systems that have a track record of regional cooperation, coordination and strong transit service providers at the local level to be the champion. The NC Team concluded that the Hickory 4-county region is a good pilot site for exploring the feasibility of regionalizing public transit systems.
- Develop detailed implementation plans for regionalizing public transportation systems.
- During the regionalization process, it is the NC Team's belief that the strongest system in a regional area with the best performance record will emerge "naturally" as the lead agency.
- Develop, implement and enforce uniform policies for all DHHS programs that fund human service transportation (effective July 1, 2005), including requirements that local DHHS offices must participate and coordinate with other state and local agencies, private organizations, transportation planners, providers of transportation services and consumers in the planning, design, and delivery of human service programs.
- Develop Client Transportation Services Guidelines for all DHHS programs that fund human service transportation (effective July 1, 2005).
- Establish uniform human service transportation reporting procedures and track the actual transportation expenditures of each individual DHHS program.

# NORTH CAROLINA DEPARTMENT OF TRANSPORTATION

And

# NORTH CAROLINA DEPARTMENT OF HEALTH & HUMAN SERVICES



# UNITED WE RIDE: STATE COORDINATION IMPLEMENTATION GRANT PROPOSAL

November 28, 2005

# STATE CONTACT INFORMATION

State.	North Caronna						
Name of Governor:	Governor Michael F. Easley						
Contact Person for this Awar	rd Application: Charles Glover						
Contact Person Address:	NC Department of Transportation						
	Public Transportation Division						
	1 South Wilmington Street						
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	Raleigh, North Carolina 27699-1550						
Contact Person Telephone N	umber: (919) 733-4713, Ext. 277						
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# **Summary Sheet**

Grant Title: "The North Carolina United We Ride State Coordination Implementation Grant Proposal"

Proposing Organizations: North Carolina Department of Transportation, Public Transportation Division and the North Carolina Department of Health & Human Services

<u>Person Submitting the Proposal, Authorized to Bind Organization:</u>
Lyndo Tippett, Secretary, NC Department of Transportation

TEAM System Contact:
Charles Glover, Assistant Director for Community Transportation,
NC Department of Transportation

Date of Proposal: November 28, 2005

Project Summary:

North Carolina has a history of working to maximize resources by improving the coordination of human service and public transportation services to meet each community's needs. Recently, the state's focus has shifted from transportation coordination within individual counties to coordination at the <u>regional</u> level, involving out-of-county transportation services.

The proposed grant activities will advance North Carolina's human service transportation coordination from the county to the regional level, focusing on the coordination of out-of-county transportation services, particularly for elderly and disabled clients of human service agencies. The grant will help decrease transportation costs for human service programs such as Medicaid while providing for increased coordination opportunities with Medicaid providers. The grant will not only investigate out-of-county transportation service options, but will also include enhancement to a website that will facilitate transportation coordination among human service agencies, health care providers, and transportation providers. Accomplishments and lessons learned from the target area will serve as a model for subsequent application statewide.

Total Federal Transit Administration Funds Requested: \$75,000

# NORTH CAROLINA STATE COORDINATION IMPLEMENTATION GRANT PROPOSAL

#### A. Introduction

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North Carolina has long been recognized as having one of the finest statewide networks of coordinated transportation systems in the country. This honorable distinction was brought about by over twenty-seven (27) years of intensive communication and collaboration on human service transportation issues between the N.C. Department of Transportation (DOT) and the N.C. Department of Health and Human Services (DHHS).

B. Briefly describe the state's mission as it relates to the coordination of human service transportation.

North Carolina has a history of working to maximize resources by improving the coordination of human service and public transportation services to meet each community's needs. This planning requirement, supported by a Governor's Executive Order, has been in place since 1978, and has resulted in the development of 84 community transportation systems serving each of the state's 100 counties.

Community transportation systems provide services on a contractual basis for a number of human service agencies in their operating areas. Of the state's 84 community transportation systems, all but four provide general public transportation services in addition to human service transportation.

Recently, the state's focus has shifted from transportation coordination within individual counties to coordination at the <u>regional</u> level, involving out-of-county transportation services. calizing that many trips involve out-of-county travel, the N.C. DOT Public Transportation Division (PTD) has undertaken an initiative to promote regionalization of public transportation

systems, as described in the state action plan. This initiative has included two activities that form the basis for the work to be conducted through this grant.

First, the N.C. DOT PTD supported the creation of the web based "Cross County Transit" (CCT) coordination tool to coordinate out-of-county non-emergency medical trips to regional bealth care facilities. The purpose of this coordination activity is to increase access to medical care while achieving cost savings for human service agencies as well as for transportation providers. A website, <a href="www.cctransit.org">www.cctransit.org</a> allows local transportation systems, health care professionals, human service agencies, and the general public to post out-of-county trip requests or search for opportunities to coordinate trips. A pilot project found that increased coordination of out-of-county trips reduced the number of missed medical appointments by 25%.

The N.C. DOT PTD also supports the "PART Connections" service that provides two daily round trips to residents of the Piedmont Triad region to medical facilities at the University of North Carolina in Chapel Hill, and Duke Medical Center in Durham. This service, operated by the Piedmont Authority for Regional Transportation (PART), coordinates with community transportation systems along the route to interchange passengers at transfer points.

This grant will build on these regional transportation coordination initiatives to replicate the PART Connections service throughout the PART human service catchment area, and will enhance the PART website to include coordination capabilities now available in the CCT website. This dual approach will increase coordination of out-of-county transportation throughout a pilot region, and develop and facilitate access to an important web-based coordination tool.

C. Describe the level of coordination/collaboration with state agencies and any other partners (e.g., providers, consumers, private for profit, non-profit organizations, or government).

On the state level, the North Carolina Human Service Transportation Council (HSTC) was authorized by Executive Order of the Governor. The current HSTC is established by Executive Order No. 21, signed by Governor Michael F. Easley. (Please refer to the State of North Carolina Executive Order No. 21 - Attachment A and the HSTC Membership List - Attachment B.) The HSTC provides policy recommendations to DHHS, DOT and other State agencies regarding human service transportation. The Council meets quarterly and serves in an advisory capacity to DOT and DHHS to address needs, barriers, and opportunities for the provision of human service transportation. The mission of the HSTC is:

To provide leadership in improving the coordination of human service transportation and to ensure that funds are maximized to serve as many elderly, disabled and financially disadvantaged individuals as possible in the State.

In addition to coordination among human service and transportation agencies at the state level, human service agencies participate as members of community transportation systems' Transportation Advisory Boards. As such, human service agency representatives are actively involved in ongoing service planning and operations policies and procedures at the local level.

Finally, the local planning process, as embodied in the Community Transportation Improvement Plan (CTIP), gathers input from local officials and planners, representatives and clients of local human service agencies, representatives from the private sector, and transportation providers, as well as the general public.

D. Briefly describe how the state action plan will meaningfully involve consumers in the development and implementation of human service transportation grant activities.

Customer satisfaction is very important to both DOT and DHHS. Consumer participation and input into the development of programs and services is strongly encouraged at the State and

annual customer satisfaction surveys.

local levels. As a requirement of the Community Transportation Improvement Plan process, local transportation systems must randomly survey at least twenty (20) human service agency passengers (from at least three different agencies) and at least ten (10) general public riders for customer satisfaction. The information gathered from the surveys is analyzed by the local transit director to improve the delivery of services. Most of the local transportation systems conduct

The DHHS Transportation Program Administrator meets with local consumer advocacy committees and the Governor's Council on Developmental Disabilities to address issues related to transportation services for persons with disabilities. The administrator also investigates and settles complaints on behalf of this population.

E. Submit a narrative of proposed project activities that includes a project time-line with deliverables, milestones, and evaluation plan. Briefly describe how these activities are related to the state's action plan and the Framework for Action.

The proposed project activities will advance human service transportation coordination from the county to the regional level, and accomplishments in the target area will serve as a model for subsequent statewide application.

The project tasks involve:

- Assessing out-of-county transportation needs in the Piedmont Triad region of North Carolina, focusing on elderly and disabled residents;
- Determining the costs of current out-of-county transportation services;
- Developing plans for public transportation alternatives that would incorporate increased coordination among human service agencies and transportation providers and estimating cost savings from implementation of those coordinated services versus current transportation services;

- Enhancing an Internet-based tool to facilitate out-of-county transportation coordination for local transit providers, human service agencies, health care providers, and the general public; and.
- Developing recommendations for implementation of coordinated transportation services
   to address regional travel patterns and needs.

The following tasks are planned for a one-year period, to start within 30 days of the grant award date. Proposed tasks, associated time periods and products include:

- Task 1: Determine out-of-county travel patterns and transportation needs within the 18county Piedmont Authority for Regional Transportation (PART) human service
  catchment area. The focus will be on clients of human service agencies, including an
  assessment of unmet out-of-county transportation needs. Staff of human service agencies
  will be interviewed to gather information on current provision of out-of-county trips, the
  true costs of those trips, and identify barriers that prohibit human service agencies from
  making greater use of public transportation services. Time required: 5 months.
- Task 2: Determine current costs of out-of-county transportation services by human service agencies and public transportation providers. Time required: 5 months (to be conducted concurrently with Task 1). Task product: Technical Memorandum summarizing findings of Tasks 1 and 2.
- Task 3: Develop plans for out-of-county public transportation alternatives to include increased coordination among human service agencies and transportation providers throughout the PART service area, as appropriate. Provide a description of expanded services that are deemed feasible, anticipated capital and operating costs for those services, and anticipated benefits (numbers of annual trips, cost savings to human service agencies and their clients, and transportation providers). Evaluate the estimated cost savings from these alternatives as compared to the way in which these transportation

services are currently provided. Time required: 5 months. Task product: Technical Memorandum summarizing alternatives.

PART Connections website to facilitate scheduling out-of-county trips. Activities will include discussions with staff of human service agencies and transportation providers to ascertain website features that would facilitate and increase their use of this tool, and then developing a list of features to be included on the enhanced PART Connections website, with an estimate of the costs and time involved to add each feature. This task will require input from a web designer/developer. Time required: 10 months (concurrent with Tasks 1-3). Task product: Technical Memorandum summarizing findings.

Task 5: Summarize findings and recommendations in a final report. Time required: 2 months. Task product: Final report.

The outcomes would include increased out-of-county transportation opportunities, particularly for residents who are elderly or disabled, and reduced costs to human service agencies as a result of increased regional transportation coordination. These activities will build on the regionalization of public transportation services, as outlined in the state action plan, and will move transportation coordination from the county to the regional level in North Carolina.

Time periods, as well as deliverables for these tasks are shown in the table below.

Task	January	February	March	April	May	Jane	July	August	September	October	November	December
1. Transportation				2						1		
2. Current transportation costs								ļ	,			
3. New transportation lternatives				21,77,14								
. Enhance website												<del></del>
5. Final report		1 May 2 mg			195 ES							

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## ★ Deliverable—Technical Memorandum

## **₩**Deliverable—Final Report

The N.C. DOT will contract with the Institute for Transportation Research and Education (ITRE) at North Carolina State University to conduct these tasks. The N.C. DOT has developed a longstanding relationship with ITRE, and has contracted for technical assistance and research activities. Examples of recent studies ITRE has conducted for the N.C. DOT PTD that form the basis for some of the work proposed for this grant include: Regionalizing Public Transportation Services, Cross County Transit Study—Out-of-County Non-Emergency Medical Transportation Coordination, and Benchmarking for North Carolina Public Transportation Systems.

# F. Describe a plan for evaluation of the implementation activities outlined in the proposal.

Increased coordination of out-of-county transportation at the regional level would help local human service agencies to increase their clients' ability to access medical care, particularly at major medical centers, and would help to contain increasing transportation costs. Through an examination of travel records on a before-and-after basis, cost savings attributable to increased regional coordination could be documented. A before-and-after analysis of trips to regional medical centers, both within the PART service area and to major out-of-county destinations such as facilities in Chapel Hill and Durham, would demonstrate improvements both in the level of access to health care facilities and transportation savings that would result from use of the coordinated out-of-county transportation service.

While this would be a short-term benefit, the benefit-cost model could also be used to calculate anticipated results from the growth of out-of-county trips, particularly in fast-growing reas of the state. Policy-makers could use the output to help determine strategies to contain increasing transportation costs, and prioritize areas in which to implement them.

G. Submit a budget that includes a line by line budget and a budget narrative. Note:

Grant funds may not be used to support capital equipment, or for the provision of services.

The attached budget reflects expenses for the Institute for Transportation Research and Education (ITRE) at North Carolina State University, the organization that will conduct the task activities under supervision from N.C. DOT PTD staff. Personnel salaries and benefits are listed per NCSU data. In State Travel and Rental of State Vehicles expenses are to conduct interviews with staff of human service agencies and PART. The Facilities and Administrative Cost rate of 20% has been negotiated per a Master Agreement between the N.C. DOT and NCSU.

Submit letters of support from state agencies, the Governor and other stakeholders.
Letters of support will be faxed under separate cover.

# **ESTIMATED BUDGET**

United We Ride: State Implementation Grant PROJECT PERIOD: 1/1/06 to 12/31/06

Budget Items	Description of Level of Effort	Total Costs	
Salaries and Wages (Personnel) Principal Investigator (Thomas J. Cook)	25 % effort for 12 months	s	17,207
Senior Research Associate	27 % effort for 12 months	\$	15,270
Research Associate	10 % effort for 12 months	\$	4,302
Communications Manager/Web Designer	20 % effort for 12 months	\$	9,277
Graduate Students SUBTOTAL PERSONNEL	10 % effort for 12 months	\$	3,000 49,0 <b>56</b>
Staff Benefits			
Staff (23%)		\$	8,459
Students (8.45%)		\$	254
Student Health Insurance		5	
SUBTOTAL STAFF BENEFITS		.\$	8,713
TOTAL PERSONNEL & BENEFITS		\$	57,769
Contracted Services (Web Developer)		\$	3,000
Supplies and Materials		\$	400
Travel			
In State		\$	700
Current Services			
Communications (long distance calls)		\$	176
Freight and Express		\$	25
Other Current Services (purchase publications)		\$	50
Fixed Charges			
Rental of Equipment/State Vehicles		\$	380
Subcontract			
(list)		\$	-
TOTAL OTHER DIRECT COSTS		\$	4,731
Facilities & Administrative Costs	· ·		
20% of MTDC		\$	12,500
TOTAL ESTIMATED BUDGET		S	75,000

State: North Carolina

Date: October 14/15, 2004
Facilitator: Gwo-Wei Torng

State Participants:

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